

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. **10815798**
APPLICANT(S)

FILING DATE **09-02-04**

CLAIMS

	AD FILED		ADDITIONAL ASSIGNMENT		ADDITIONAL ASSIGNMENT	
	CID	DEP	CID	DEP	CID	DEP
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	AD FILED		ADDITIONAL ASSIGNMENT		ADDITIONAL ASSIGNMENT	
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